

6-30-04

JFw

CASE PH7140 DIV1

FILING BY "EXPRESS MAIL" UNDER 37 CFR 1.10

EV305492407US
Express Mail Label Number

June 29, 2004
Date of Deposit

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF

JACOBSON ET AL.

APPLICATION NO: *10/730,170*

FILED: DECEMBER 8, 2003

FOR: MONOCYCLIC OR BICYCLIC CARBOCYCLES AND
HETEROCYCLES AS FACTOR XA INHIBITORS

Mail Stop DD
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

In accordance with 37 C.F.R. §1.56, applicants wish to call the Examiner's attention to the references cited on the attached form(s) PTO-1449.

These references were cited in a search report in a corresponding PCT International application. Copies of these references and the search report are enclosed herewith.

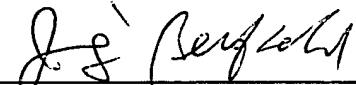
The Examiner is requested to consider the foregoing information in relation to this application and indicate that each reference was considered by returning a copy of the initialed PTO 1449 form(s).



Certificate under 37 C.F.R. §1.97(e)(1)

I, the undersigned agent, hereby certify that each item of information contained in this Information Disclosure Statement was first cited in a communication from a foreign patent office in a counterpart foreign application not more than thirty days prior to the filing of this Statement.

Respectfully submitted,



Jing S. Belfield
Agent for Applicants
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Patent Department
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Date: June 29, 2004

INFORMATION DISCLOSURE CITATION



Sheet 1 of 1

 ATTY. DOCKET NO.
 PH7140 DIV1
 APPLICATION NO.
 10/730,170
 APPLICANT
 JACOBSON ET AL.
 FILING DATE
 12/08/03

Group

U.S. PATENT DOCUMENTS

EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE
	AA	6,020,357	2/1/00	PINTO et al.			
	AB						
	AC						
	AD						
	AE						
	AF						
	AG						
	AH						
	AI						
	AJ						
	AK						
	AL						

FOREIGN PATENT DOCUMENTS

		DOCUMENT NUMBER	DATE	OFFICE	CLASS	SUBCLASS	TRANSLATION YES <input type="checkbox"/> NO <input type="checkbox"/>
	AM						<input type="checkbox"/> <input type="checkbox"/>
	AN						<input type="checkbox"/> <input type="checkbox"/>
	AO						<input type="checkbox"/> <input type="checkbox"/>
	AP						<input type="checkbox"/> <input type="checkbox"/>
	AQ						<input type="checkbox"/> <input type="checkbox"/>

OTHER DOCUMENTS (Including Author, Title, Date, Pertinent pages, Etc.)

	AR	
	AS	
	AT	

EXAMINER

DATE CONSIDERED

*EXAMINER: Initial of reference considered, whether or not citation is in conformance with MPEP 609: Draw a line through citation if not in conformance and not considered. Include a copy of this form with the next communication to applicant.

(Use several sheets if necessary)

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	AM						<input type="checkbox"/>	<input type="checkbox"/>
	AN						<input type="checkbox"/>	<input type="checkbox"/>
	AO						<input type="checkbox"/>	<input type="checkbox"/>
	AP						<input type="checkbox"/>	<input type="checkbox"/>
	AQ						<input type="checkbox"/>	<input type="checkbox"/>

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